

**Project on CHW Policy and Practice
University of Texas Institute for Health Policy
Sustainable Financing of CHW Activities: Three Broad Pathways**

Basic pathways			
	A Conventional health care	B Population/community-based public health	C Patient-centered care systems (emerging hybrid structures)
1 Promising program models	Emergency room diversion “Hot-spotters” (high cost users) Prenatal/perinatal coaching Primary care based chronic disease management Care transitions Home/community-based long-term care	Specific condition-focused initiatives Community development approach (social determinants)	Patient Centered Medical Homes Accountable Care Organizations Health Homes
2 Specific CHW roles in these models	Care coordination Self-management support for chronic conditions Referral and assistance with non- medical needs and barriers Medication management support Patient/family advocacy Support and extension of health education Patient navigation	Basic outreach and education Community advocacy/organizing	Combination of health care and population-based (as at left)
3 Payment mechanisms for these models	Fee for service Managed care organizations: admin/service dollars; duals Medicaid 1115 waivers Internal financing Prospective payment (FQHCs)	Medicaid waivers Block grants Prevention trust fund (Mass. model) Pooled funds from third-party healthcare payers	Bundled/global/prospective payment Supplemental capitation payment for specific services
4 Options for third-party payers	CHWs directly employed by payer Health care provider contracts/add-ons to hire CHWs CBO contracts to employ CHWs CHWs as independent contractors		